

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**1. Article Addressed to:**

Exteco Inc.  
f/k/a Thermo Electric Co  
c/o Its Highest Ranking Officer  
109 North Fifth Street  
Saddle Brook, NJ 07663

*07W 1064 STC*

**2. Article Number***(Transfer from service label)*

*7003 3110 0004 0799 4523*

PS Form 3811, August 2001

**COMPLETE THIS SECTION ON DELIVERY****A. Signature** Agent Addressee**B. Received by (Printed Name)***Tina Krashner***C. Date of Delivery**

*12/20/07*

**D. Is delivery address different from item 1?**  Yes  
If YES, enter delivery address below:  No

**3. Service Type** Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.**4. Restricted Delivery? (Extra Fee)** Yes

Domestic Return Receipt

102595-02-M-1540